

1082

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO.	FILING DATE				
							APPLICANT(S)					
CLAIMS												
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		IND.	DEP.	IND.	DEP.	IND.	DEP.
	IND.	DEP.	IND.	DEP.	IND.	DEP.						
1												
2												
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TOTAL IND.												
TOTAL DEP.												
TOTAL CLAIMS												
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99												
100												
TOTAL IND.												
TOTAL DEP.												
TOTAL CLAIMS												

20/2

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-375)							SERIAL NO.	FILING DATE
							APPLICANT(S)	
CLAIMS								
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT				
IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	
D1	3					51		
102	3					52		
103	3					53		
104	3					54		
105	1	1				55		
106	1	1				56		
107	2					57		
108	2					58		
109	2					59		
110	2					60		
111	2					61		
112	2					62		
113	2					63		
114	2					64		
115	2					65		
116						66		
117						67		
118						68		
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139						89		
140						90		
141						91		
142						92		
143						93		
144						94		
145						95		
146						96		
147						97		
148						98		
149						99		
150						100		
TOTAL IND.						TOTAL IND.		
TOTAL DEP.						TOTAL DEP.		
TOTAL CLAIMS						TOTAL CLAIMS		